State	No. of STD Clinics
J & K	17
Jharkhand	15
Karnataka	44
Kerala	21
Lakshadweep	1
MP	50
Maharashtra	79
Manipur	10
Meghalaya	0
Mizoram	8
Nagaland	11
Orissa	23
Pondicherry	4
Punjab	17
Rajasthan	37
Sikkim	2
Tamil Nadu	58
Tripura	5
Uttar Pradesh	67
Uttaranchal	9
West Bengal	33
All India	875

Deficiency in disease surveillance system

3119. SHRI S. ANBALAGAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware that the outbreak of various diseases in various parts of the country are mainly due to very poor disease surveillance system of the country particularly due to inefficient and inadequate functioning of the district surveillance units;

(b) if so, the details thereof and the effective steps proposed to be taken to prevent various regional and seasonal diseases on time;

(c) whether the district level disease surveillane system is in place in all the districts of the country;

(d)if so, the details thereof including its manpower and technical and infrastructural facilities; and

(e) if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (e) Disease surveillance is primarily the responsibility of the State Government. The Government of India supplements the efforts of the State to combat the outbreak of diseases. A National Surveillance Programme for Communicable Diseases (NSPCD) was implemented in 101 districts in the year 1997 for augmenting the surveillance activities.

Further, Integrated Disease Surveillance Project (IDSP) has been launched in November 2004 as a Centrally sponsored scheme with the objective to integrate disease surveillane activities in the country. Disease Surveillance would provide essential data to detect early warning signals of impending outbreaks and epidemics and to facilitate timely and effective response to crub spread of diseases. The project would be implemented by State Surveillance units and District Surveillance units.

IDSP is being introduced is phased manner as detailed below:

Phase I (2004-05) 9 States, namely, Tamil Nadu, Maharashtra, Karnataka, Andhra Pradesh, Uttaranchal, Himachal Pradesh, Madhya Pradesh, Kerala, Mizoram and all the 101 districts covered under the pilot project 'National Surveillance Programme for Communicable diseases'.

Phase II (2005-06) 14 States/UTs, namely, Gujarat, Haryana, Rajasthan, Orissa, Chhattisgarh, West Bengal, Delhi, Goa, Chandigarh, Pondicherry, Manipur, Meghalaya, Nagaland and Tripura.

Phase III (2006-07) Remaining States/UTs, under IDSP, the district level is the focus for integrating surveillance functions and Districts Surveillance Units have been formed in all the districts of Phase I States and other districts of Phase II & III States are being covered in phased manner.

Each, District Survillance Team consists of a District Surveillance officer, and epidemiologists, a Microbiolgist/Pathologist, a Physician/ Pediatrican and District Training officer. Technical and infrastructural facilities are provided through upgradation of District Public Health Laboratories and establishment of District Data Centre with satellite connectivity in the officer of Chief District Health Officer.

Enquiry on non-supply of free medicines by Government hospitals

†3120. SHRI KAMAL AKHTAR:
SHRI AMIR ALAM KHAN:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware of the fact that the medicines provided in Government hospitals free of cost are not being distributed to needy people;

(b) if so, the reasons therefor;

(c) whether Government have conducted any enquiry in this regard; and

(d) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (d) No such instance has come to the notice of the Government. In Central Government Hospitals all the medicines as per Hospital formulary are provided free of cost to the patients attending the hospital.

Opening of medical colleges in tribal and backward States

†3121. MISS ANUSUIYA UIKEY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the number of medical colleges in the country;

(b) whether it is being considered to raise the number of these colleges in future;

(c) whether these colleges would also be opened in the tribal, backward States; and

†Original notice of the qu tion was received in Hindi.